



2017-2018 NEW MEMBER APPLICATION FORM

To be completed by the Prospective Member

2302 Midwestern Parkway, Wichita Falls, TX 76308 (940) 692-9797

CANDIDATE INFORMATION:

Name: First _____ Maiden _____ Last _____

Address/City/State/Zip: _____

Telephone Numbers: Home: _____ Cell: _____ Work: _____

Email: _____ Age: _____ Date of Birth: _____

Profession: _____ Full Time/Part Time: _____

Spouse's Name: _____

BACKGROUND INFORMATION:

Current volunteer experience:

Past volunteer experience:

Community organizations and/or professional affiliations (including offices held):

Special Skills & Interests:

Please list 2 Volunteer or Work Referrals. Make sure you include their name, position and phone number:

1. _____

2. _____

Questions? Please contact:

jlwf@sbcglobal.net

or

Kim Childs (940) 636-3030

Jaclyn Johnson (940) 867-3102

